

DIVISION OF HEALTH SERVICES  
NACCHO-MRC  
DECEMBER 1, 2007 - JUNE 30, 2008  
BUDGET NO. 255-400401

ACCT. NO.	ACCOUNT NAME	CURRENT BUDGET	DIFFERENCE	PROPOSED BUDGET
4401	FEDERAL GRANTS		(5,000.00)	(5,000.00)
	TOTAL FEDERAL REVENUE	-	(5,000.00)	(5,000.00)
6042	MATERIALS & SUPPLIES		1,750.00	1,750.00
6052	OFFICE SUPPLIES		1,500.00	1,500.00
	TOTAL SUPPLIES	-	3,250.00	3,250.00
6428	FREIGHT & STORAGE		250.00	250.00
	TOTAL SERVICES	-	250.00	250.00
6852	PRINTING		500.00	500.00
6854	MAIL SERVICES		1,000.00	1,000.00
	O&M CONTRA EXPENDITURE TOTAL	-	1,500.00	1,500.00
	TOTAL EXPENDITURES	-	5,000.00	5,000.00
	NET COST	-	-	-

DIVISION OF ROADS & PUBLIC WORKS  
PRINTING SERVICES  
JULY 1, 2007 - JUNE 30, 2008  
BUDGET NO. 961-307305

		-	-	-
ACCT. NO.	ACCOUNT NAME	CURRENT BUDGET	DIFFERENCE	PROPOSED BUDGET
4262	SERVICE INCOME	(1,053,029)	(500)	(1,053,529)
6461	PRINT OUTSIDE	77,332	500	77,832
	NET OPERATIONS	(975,697)	-	(975,697)

DIVISION OF ROADS & PUBLIC WORKS  
MAIL SERVICES  
JULY 1 2007 - JUNE 30, 2008  
BUDGET NO. 961-307304

ACCT. NO.	ACCOUNT NAME	CURRENT BUDGET	DIFFERENCE	PROPOSED BUDGET
4262	SERVICE INCOME	(671,143)	(1,000)	(672,143)
6068	POSTAGE	310,948	1,000	311,948
		(360,195)	-	(360,195)

## CONTRACT AND ENCUMBRANCE INFORMATION SHEET

THIS SHEET MUST BE COMPLETED AND SIGNED BY THE DEPARTMENT HEAD AND DIVISION DIRECTOR,  
AND, IF APPLICABLE, THE HEALTH POLICY COORDINATOR, AND ATTACHED TO ALL CONTRACT AND  
RESOLUTION PACKETS BEFORE ANY ACTION WILL BE TAKEN.

1. Department Requesting Services: HEALTH DEPARTMENT
2. Preparer's Name, Telephone #, and E-Mail Address:  
Johnathan Russell      544-7585      [johnathan.russell@shelbycountyttn.gov](mailto:johnathan.russell@shelbycountyttn.gov)
3. DESCRIPTION OF ITEM TO BE PURCHASED, BUILT, OR SERVICE TO BE PROVIDED:  
Tennessee Breast and Cervical Cancer Contract with Tenn. Dept. of Health  
Provides revenue to fund Breast & Cervical Cancer Early Detection Program.
4. NAME, ADDRESS, VENDOR NUMBER, SOCIAL SECURITY NUMBER, AND/OR FEDERAL I.D.  
NUMBER OF VENDOR/CONSULTANT/AGENCY WITH WHICH SHELBY COUNTY WILL BE  
CONTRACTING:  
Tenn. Dept. of Health  
Cordell Hull Bldg.  
425 5th Avenue North Nashville, TN 37243  
VENDOR NO./FED ID NO. \_\_\_\_\_
5. COST OF ITEM OR SERVICE REQUESTED: Revenue \$5,000.00
6. TERM OF PROPOSED CONTRACT/AGREEMENT: 12/01/07-07/31/08
7. FUND, ORG, AND ACCOUNT NUMBER (13 DIGITS) **\*\*FOR MULTIPLE ACCOUNTS, PLEASE  
SPECIFY DOLLAR AMOUNT FOR EACH\*\***  
733-400513      No Funds to Encumber  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. COMMODITY CODE: 961
9. VENDOR/CONSULTANT/AGENCY SELECTED BY (CHECK ONE) :  
**\*\*PLEASE ATTACH APPROVAL DOCUMENTS\*\***  
a. \_\_\_\_\_ Bid/RFP Process - # & Date TDH Contract  
b. \_\_\_\_\_ Emergency/Sole Source \_\_\_\_\_
10. LOSB/MBE INFORMATION: Please check the appropriate description  
  
       MBE      (MINORITY OWNED BUSINESS ENTERPRISE)  
                        MALE             FEMALE  
       WBE      (WOMEN OWNED BUSINESS ENTERPRISE)  
       LOSB      (LOCALLY OWNED SMALL BUSINESS)  
                 ANNUAL SALES DOES NOT EXCEED \$3 MILLION  
  X   N/A
11. SPECIAL INSTRUCTIONS (ROUTING, FUNDING, BUDGET TRANSFER IN PROCESS)  
\_\_\_\_\_

REVIEWED AND APPROVED BY:

DEPARTMENT HEAD

DATE

HEALTH POLICY COORDINATOR      DATE  
(If Applicable)

DIVISION DIRECTOR

DATE